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PREMIUM HEALTH VIEWPOINTS

# FDA and Pfizer Knew COVID Shot Caused Immunosuppression

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*April 1, 2022, another batch of 11,000 Pfizer documents were released by the U.S. Food and Drug Administration. Pfizer trial data reveal natural immunity was as effective as the jab, and that shot side effects were more severe in those under 55.*

With another batch of 11,000 Pfizer documents, released April 1, 2022, old suspicions have gained fresh support. As reported by “Rising” cohost Kim Iversen (video above), the first bombshell revelation is that natural immunity works, and Pfizer has known it all along.

The clinical trial data showed there was no difference in outcomes between those with previous COVID infection and those who got the shot. Neither group experienced severe infection. Natural immunity was also statistically identical to the shot in terms of the risk of infection.

## Younger Adults More Likely to Experience Side Effects

The second revelation is that side effects from the shots were more severe in younger people, aged 18 to 55, than those aged 55 and older. (The risk of side effects also increased with additional doses, so the risk was higher after the second dose than the first.)

As many of us have said all along, the risk of severe COVID is dramatically lower in younger people than those over 60, which makes an elevated risk of side effects unacceptable.

As noted by The Naked Emperor on Substack,[1] “with a vaccine that is producing more frequent and more severe reactions and adverse events in younger individuals, the vaccine should have been restricted to those who were actually at risk of severe COVID-19.”

## Pfizer Documents Show High Rate of Myocarditis

Interestingly, Pfizer's documentation also includes medical information that mainstream media and fact checkers have labeled as misinformation or disinformation. A pediatric consent form lists several possible side effects, including a myocarditis rate of 10 in 100,000 – far greater than the 1 in 50,000 (i.e., 2 in 100,000) rate previously reported.

We also know that myocarditis is far more frequent in young males, so for them, the risk is significantly higher than 10 in 100,000, as they make up the bulk of these injuries.

## **Antibody-Dependent Enhancement Has Not Been Ruled Out**

Many who have warned about the possibility of mRNA shots causing antibody-dependent enhancement (ADE) – a situation in which you end up being more susceptible to serious infection than you would have been otherwise – have been smeared and demonized by media and labeled as disinformation spreaders.

Yet Pfizer's own consent form clearly states: "Although not seen to date, it cannot yet be ruled out that the studied vaccine can make a later COVID-19 illness more severe." As noted by Iversen, if ADE truly was of no concern at all, the consent form would not include it. Yet there it is.

Vaccine-associated enhanced disease (VAED) is also listed as an "Important Potential Risk" in Table 5 on page 11 of a document called "5.3.6 Cumulative Analysis of Post-Authorization Adverse Event Reports." [2]

As of February 28, 2021, Pfizer had 138 cases of suspected VAED, 75 of which were severe, resulting in hospitalization, disability, life-threatening consequences or death; a total of 38 cases turned out to be lethal and 65 remained unresolved. [3][4]

Moreover, as noted by the Daily Expose, [5] "Phase 3 clinical trials are designed to uncover frequent or severe side effects before a vaccine is approved for use, including ADE. But herein lies the problem, [because] none of the COVID-19 vaccines have completed Phase 3 trials."

Pfizer's Phase 3 trial is due to be completed February 8, 2024 [6] – nearly two

years from now! Despite that, Pfizer concluded in its FDA submission that “None of the 75 cases could be definitively considered as VAED.”

*“[H]ow on earth could they not definitively conclude that VAED was to blame when 75% of the confirmed ‘break-through’ cases reported to them were severe disease resulting in hospitalization, disability, life-threatening consequences of death?”* The Daily Expose asks.[7]

## **Pfizer Knew About Immunosuppression**

Another revealing statement found in the documents is this:

*“Clinical laboratory evaluation showed a transient decrease in lymphocytes that was observed in all age and dose groups after Dose 1, which resolved within approximately one week ...”*

In other words, Pfizer knew that, in the first week after the shot, people of all ages experienced transient immunosuppression, or put another way, a temporary weakening of the immune system, after the first dose.

As noted by Iversen, this may have skewed infection rates, as people were not considered partially vaccinated until 14 days after their first shot,<sup>11</sup> and officially fully vaccinated two weeks after the second dose.

If people are susceptible to infection during that first week, yet are counted as unvaccinated during that time, this makes it appear as though the unvaccinated are more prone to infection when that’s simply not true. Pfizer’s own trial showed infection was significantly more common in the vaccine group than the placebo group – 409 versus 287 – within the first seven days of the jab.

## **Fully Vaxxed Are More Likely to Die From COVID**

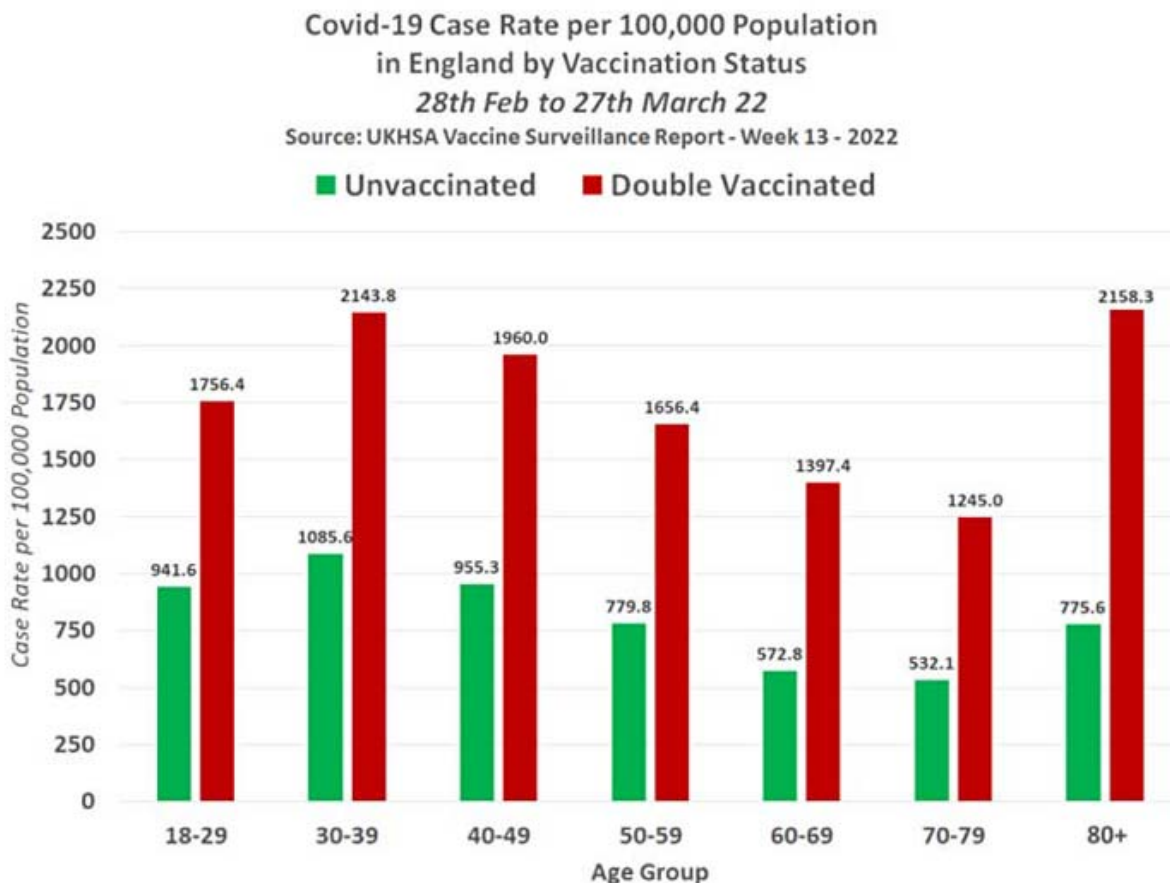
The fact that Pfizer and the U.S. Food and Drug Administration were aware the shot caused immunosuppression is incriminating, now that U.K. government data show that, compared to the unvaccinated, those who have received two doses are:[8]

- Up to three times more likely to be diagnosed with COVID-19

- Twice more likely to be hospitalized with COVID-19
- Three times more likely to die of COVID-19

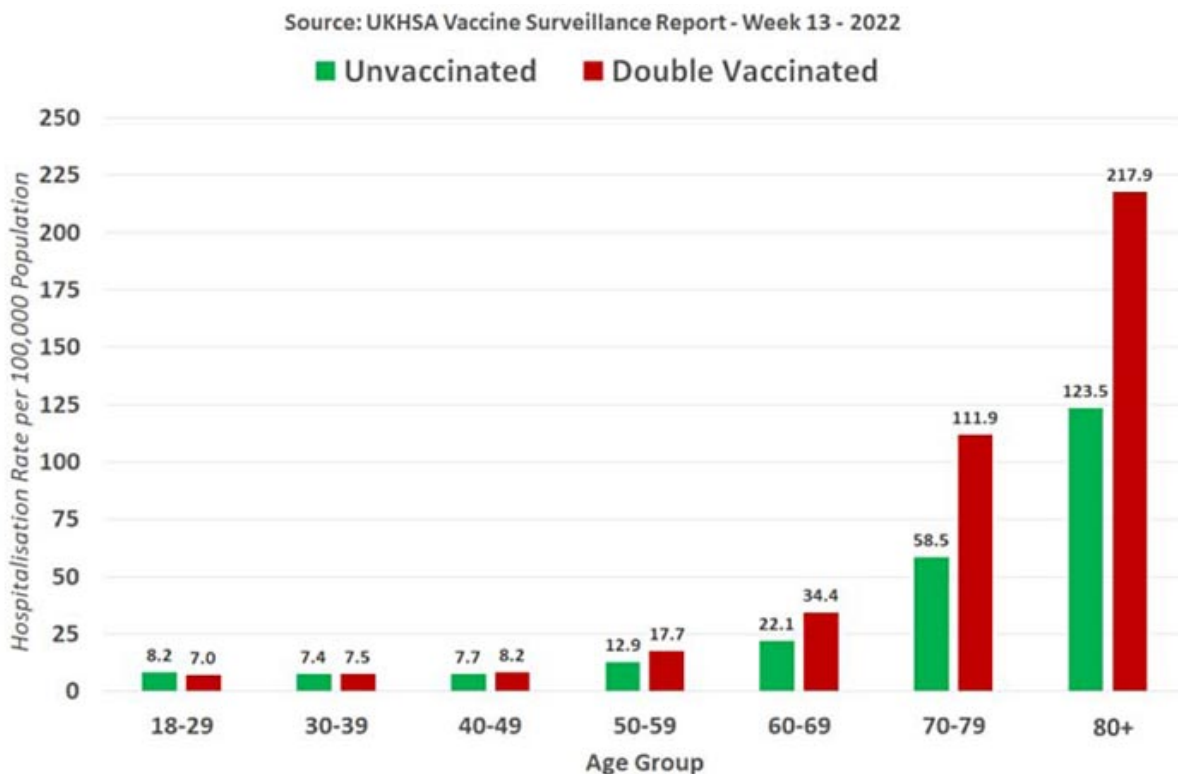
The Pfizer documents admit there was a temporary drop in immune function after the first dose, but the real-world data showing an increased risk of severe infection and death due to COVID among the double jabbed suggest ADE may indeed be at play later on as well.

The chart below, created by the Daily Expose,[9] using data from the UKHSA Vaccine Surveillance Report for week 13, 2022[10] (pages 40 and 45), reveals who's more likely to get COVID. And the infection rate for triple-vaxxed is even higher than the double vaxxed.

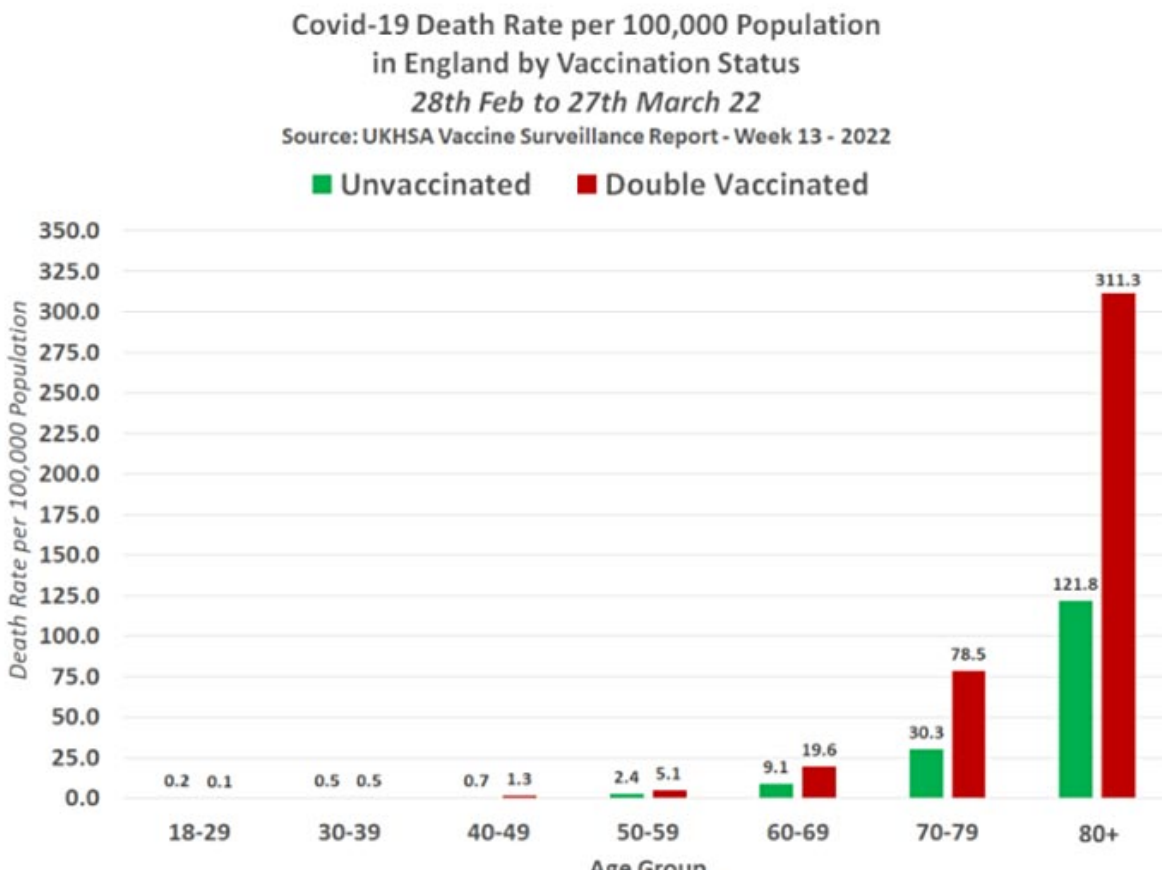


The next chart was created by the Daily Expose[11] using data from pages 41 and 45, comparing COVID hospitalization rates.

**Covid-19 Hospitalisation Rate per 100,000 Population in England by Vaccination Status**  
 28th Feb to 27th March 22



And, finally, there is a comparison of the death rates, based on pages 44 and 45 of the UKHSA Vaccine Surveillance Report for week 13, 2022.[12] Anyone over the age of 40 who has been double jabbed is now more likely to die of COVID than an unvaccinated person of the same age.



Age Group

## Negative Vaccine Effectiveness in the Real World

The Daily Expose goes on to calculate and graph the real-world effectiveness rate of the COVID jab, and it's dire news:[13]

*“If the rates per 100,000 are higher among the vaccinated, which they are, then this means the COVID-19 injections are proving to have a negative effectiveness in the real-world. And by using Pfizer’s vaccine effectiveness formula we can accurately decipher what the real-world effectiveness among each age group actually is.*

*Pfizer’s vaccine formula: Unvaccinated Rate per 100k – Vaccinated Rate per 100k / Unvaccinated Rate per 100k x 100 = Vaccine Effectiveness ...*

*This data shows that all double vaccinated people over age 18 are between 2 and 3 times more likely to be infected, with a minus-87% vaccine effectiveness among 18 to 29 year olds, and a minus-178% vaccine effectiveness among the over 80’s.*

*[A]ll double vaccinated people over age 30 are between 0.2 and 2 times more likely to be hospitalized, with a minus-1% vaccine effectiveness among 30 to 39 year olds, and a minus-76% vaccine effectiveness among the over 80’s.*

*The following chart shows the real world COVID-19 vaccine effectiveness against death among the double vaccinated population in England, based on the death rates provided above ...*

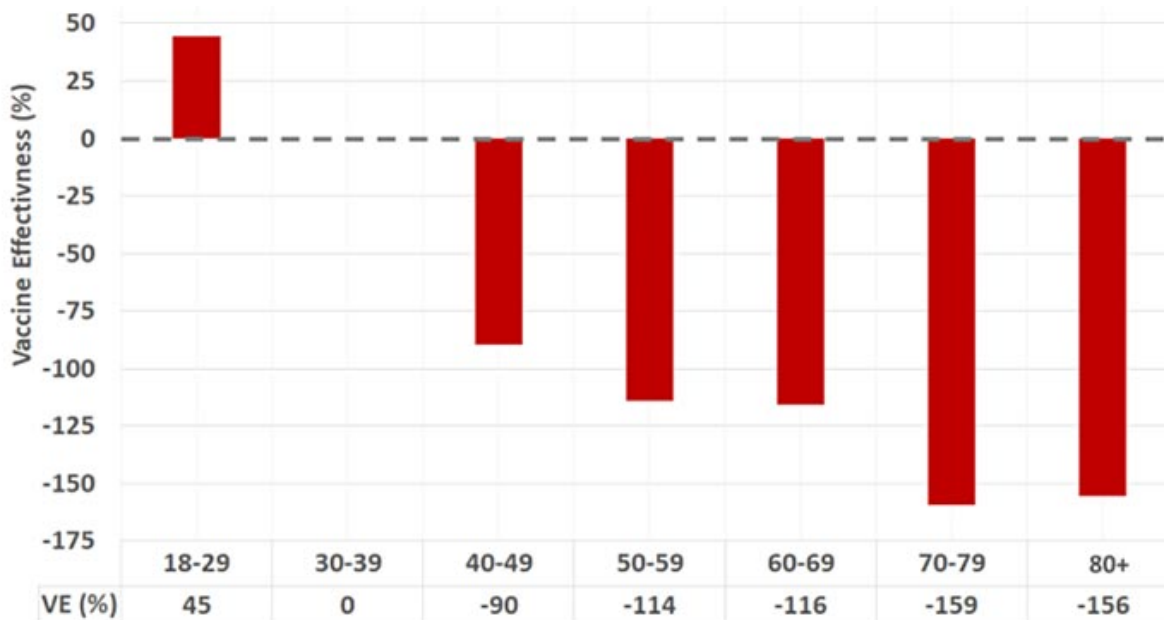
*[A]ll double vaccinated people over age 40 are between 2 and 3 times more likely to die of COVID-19, with a minus-90% vaccine effectiveness among 30 to 39 year olds, and a minus-156% vaccine effectiveness among the over 80’s.”*

**Covid-19 Vaccine Effectiveness (%) against Death among Double Vaccinated Population in England**

**28th Feb to 27th March 22**

Source: UKHSA Vaccine Surveillance Report - Week 13 - 2022





### Pfizer Hired 600 to Process Unprecedented Report Load

For the last two years, we’ve been keeping an eye on the U.S. Vaccine Adverse Events Reporting System (VAERS), shaking our heads in disbelief as the numbers shot up by the hundreds every single week, rapidly outpacing injuries for every other vaccine combined over the past 32 years.[14]

As of March 25, 2022, there were 1,205,753 COVID jab-related reports, including 145,781 hospitalizations and 26,396 deaths.[15] There has never been a medical product in modern history that can compare. Nothing has been as injurious and lethal as these experimental injections.

Between December 2020 and the end of February 2021, Pfizer shipped out 126,212,580 doses of its mRNA jab worldwide. Divided by 158,000 side effects, we get an adverse event rate per dose of nearly 1:800.

In an earlier batch of documents, we learned Pfizer received 42,086 case reports containing a total of 158,893 events in the first three months of the rollout. In that release, the number of doses shipped was redacted, but in the April 1, 2022, release, it was left unredacted, which means we can now calculate the rate of adverse events reported to Pfizer in those first three months.

Between December 2020 and the end of February 2021, Pfizer shipped out 126,212,580 doses of its mRNA jab worldwide. Divided by 158,000 side effects, we get an adverse event rate per dose of nearly 1 in 800,[16] which is just crazy irresponsible.



We now also have documentation showing Pfizer, by the end of February 2021, had hired 600 additional full-time employees to process the unprecedented influx of adverse event reports, and they predicted that by the end of June 2021, they'd end up hiring more than 1,800.[17]

In the end, the COVID jab will go down in history as the biggest medical malfeasance ever to occur with the willing participation of both drug companies and regulatory agencies. And there's no end in sight.

In March 2022, the FDA went ahead and authorized doses 4 and 5, based on a preprint study[18][19] that found a fourth Moderna shot was 11% effective and caused side effects in 40% of recipients, and a fourth Pfizer shot was 30% effective and caused side effects in 80% of people.

I'm not sure what it'll take for this public health nightmare to end and for the responsible parties to be held to account for their criminal negligence, but apparently, we've not hit critical mass outrage yet.

*Originally published April 14, 2022 on Mercola.com*

## Sources and References

- [1] [The Naked Emperor Substack March 29, 2022](#)
- [2],[3] [The Defender March 15, 2022](#)
- [5],[3],[6] [Cumulative Analysis of Post-Authorization Adverse Event Reports, Page 11, Table 5](#)
- [4], [5], [7], [8], [9], [11], [13] [Daily Expose April 3, 2022](#)
- [6] [Clinical Trials NCT04368728](#)
- [11] [MMWR March 19, 2021; 70\(11\): 396-401](#)
- [10],[12] [UKHSA Vaccine Surveillance Report for week 13, 2022](#)
- [14], [16], [17] [The Defender April 5, 2022](#)
- [15] [OpenVAERS As of March 25, 2022](#)

- [18] [MedRxiv February 15, 2022, DOI: 10.1101/2022.02.15.22270948](#)
- [19] [NEJM Correspondence March 16, 2022 DOI: 10.1056/NEJMc2202542](#)



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Dr. Joseph Mercola is the founder of Mercola.com. An osteopathic physician, best-selling author, and recipient of multiple awards in the field of natural health, his primary vision is to change the modern health paradigm by providing people with a valuable resource to help them take control of their health.